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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/820,993	
Filing Date	4/9/2004	
First Named Inventor	Kelly	
Art Unit	1756	
Examiner Name		
Attorney Docket Number	ZLX-HUL-003	

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450										
Please withdraw me as attorney or agent for the above identified patent application, and										
all the attorneys/agents of record.										
the attorneys/agents (with registration numbers) listed on the attached paper(s), or										
the attorneys/agents associated with Customer Number										
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.										
The reasons for this request are: I resigned from my in-house position due to their failure to pay my salary for over a year.										
CORRESPONDENCE ADDRESS										
1. The correspondence address is NOT affected by this withdrawal.										
2. Change the correspondence address and direct all future correspondence to:										
The address associated with Customer Number:										
OR										
	m <i>or</i> dividual Name	McKee, Voorhees & Sease								
Address		801 Grand Avenue Suite 3200								
City	•	Des Moines	State	lowa				Zip	50309-2721	
Country		USA								
Telephone 515.288.3667				Email sease@ipmvs.com						
Signature	Ra	rald Ditra								
Name	Ronald D. Trice	3						40,435		
Date	3	114/06				Telephone No. 7			703 786 0984	
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration										

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